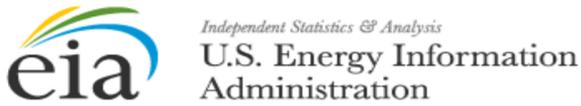


This form may be submitted to the EIA by secure file transfer. It is recommended that you send your Excel files to EIA using a secure method of transmission: HTTPS. This is an industry standard method to send information over the web using secure, encrypted processes. (It is the same method that commercial companies communicate with customers when transacting business on the web.) Send your surveys using this secure method at: <https://signon.eia.doe.gov/upload/noticeoog.jsp>



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 Version No.: 2021.01
 Burden: 2.6 hours

**MONTHLY LIQUEFIED NATURAL GAS STORAGE REPORT
 FORM EIA-191L**

This report is **mandatory** under the Federal Energy Administration Act of 1974 (Public Law 93-275). Failure to comply may result in criminal fines, civil penalties and other sanctions as provided by law. For the sanctions and the provisions concerning the confidentiality of information submitted on this form, see instructions. **Title 18 USC 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction.**

PART 1. RESPONDENT IDENTIFICATION DATA	PART 2. SUBMISSION INFORMATION
<p>REPORT PERIOD: Month <input type="text" value="12"/> Year <input type="text" value="2"/><input type="text" value="0"/><input type="text"/></p> <p>EIA ID NUMBER: <input type="text" value="1"/><input type="text" value="9"/><input type="text" value="1"/><input type="text"/></p> <p>If this is a resubmission, enter an "X" in the box: <input type="checkbox"/></p> <p>If any Respondent Identification Data has changed since the last report, enter an "X" in the box: <input type="checkbox"/></p> <p>Company Name: _____</p> <p>Contact Name: _____</p> <p>Phone No.: _____ Ext: _____</p> <p>Fax No.: _____</p> <p>Address 1: _____</p> <p>Address 2: _____</p> <p>City: _____ State: _____ Zip: _____ - _____</p> <p>Email address: _____</p>	<p>Completed form(s) must be filed no later than 20 days after the report month.</p> <p>Form must be submitted using the following method:</p> <p>Secure File Transfer:</p> <p style="text-align: center;">https://signon.eia.doe.gov/upload/noticeoog.jsp</p> <p>Questions? Call: (877) 800-5261</p> <p>Only liquefied natural gas (LNG) facilities report on this form. Underground natural gas storage facilities report on the EIA-191: https://www.eia.gov/survey/#eia-191</p> <p>Do not complete data items that are grayed out, such as "Type of Facility," "Base Gas," and "Working Gas."</p>

**PART 3. FACILITY CHARACTERISTICS as of 9:00 a.m. Central Time on the last day of report month
 (Report all volumes in Thousand Cubic Feet (Mcf) @14.73 psia - 60° Fahrenheit)**

	Facility	Facility	Facility	Facility
LNG Facility Name				
Reservoir Name				
Location State				
Location County				
Type of Facility				
Field Status - If Inactive, please explain below in Comments	Active Inactive	Active Inactive	Active Inactive	Active Inactive
Working Gas Capacity (Mcf)				
Total LNG Storage Capacity (Mcf)				
Maximum Deliverability (Mcf/day)				

**PART 4. MONTHLY GAS STORAGE as of 9:00 a.m. Central Time on the last day of report month
 (Report all volumes in Thousand Cubic Feet (Mcf) @14.73 psia - 60° Fahrenheit)**

Base Gas			
Working Gas			
Total LNG in Storage			
Injections			
Withdrawals			

Comments: Identify any unusual aspects of your reporting period's activity. (To separate one comment from another, press ALT + ENTER.)